## BEST AVAILABLE COPY Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

09866541

| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |  |  |              |             |                              |                  |        | SMALL ENTITY TYPE |                        | OR         | OTHER<br>SMALL I |                        |
|--|--|--|--------------|-------------|------------------------------|------------------|--------|-------------------|------------------------|------------|------------------|------------------------|
| TOTAL CLAIMS   |  |  | 43           |             |                              |                  |        | RATE              | FEE                    |            | RATE             | FEE                    |
| FOR  |  |  | NUMBER FILED |             | NUMBER EXTRA                 |                  |        | BASIC FEE         | 355.00                 | OR         | BASIC FEE        | 710.00                 |
| TOTAL CHARGEABLE CLAIMS (3 mir   |  |  | us 20=       | .2          | 5                            |                  | X\$ 9= |                   | OR                     | X\$18=     | HN.W             |                        |
| INDEPENDENT CLAIMS 6 minus 3   |  |  |              | านร 3 =     | = 3                          |                  |        | X40=              |                        | OR         | X80=             | 210.4                  |
| MULTIPLE DEPENDENT CLAIM PRESENT   |  |  |              |             |                              |                  |        | .125              |                        |            | +270=            | S.F.V.                 |
| * If the difference in column 1 is less than zero, enter *0* in column 2   |  |  |              |             |                              |                  |        | +135=             |                        | OR         |                  | 7/4                    |
| CLAIMS AS AMENDED - PART II  |  |  |              |             |                              |                  |        | TOTAL             |                        | OR         | OTHER            | THAN                   |
| A 7/22-05(Column 1) (Column 2) (Column 3)  |  |  |              |             |                              |                  | L      | SMALL E           | NTITY                  | OR         | SMALL            |                        |
| <b>AMENDMENTAC</b>   |  | CLAMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | PREV        | IEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |        | RATE              | ADDI-<br>TIONAL<br>FEE |            | RATE             | ADDI-<br>TIONAL<br>FEE |
|  | Total  | . 166                                    | Minus '      | /7          | ,-<br>;-*                    | = -              |        | X\$ 9=            |                        | OR         | X\$18=           |                        |
|  | Independent                                    | 610                                      | Minus        | •••/        | 7                            | = -              |        | X40=              |                        | OR         | xåd=             | 504                    |
| L  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |              |             |                              |                  | J      | +135=             |                        | OR         | +270=            |                        |
|  |  |  |              |             |                              |                  |        | TOTAL             |                        | OR         | TOTAL            |                        |
| ADDIT. FEE |  |  |              |             |                              |                  |        |                   |                        | ADDIT. FEE |                  |                        |
| AMENDMENT B  | <i></i>  | CLAIMS                                   |              | HIG         | HEST                         |                  | 1      |                   | ADDI-                  | l          |                  | ADDI-                  |
|  |  | REMAINING<br>AFTER<br>AMENDMENT          |              | PREV        | MBER<br>IOUSLY<br>FOR        | PRESENT<br>EXTRA |        | RATE              | TIONAL<br>FEE          |            | RATE             | TIONAL<br>FEE          |
|  | Total  | . 64-                                    | Minus        |             | 56                           | = A              | 1      | X\$ 9=            |                        | OR         | X\$18=           | 180                    |
|  | Independent                                    | · 10                                     | Minus        | ***         | 19                           | . 0              | 7      | X40=              |                        | OR         | X80=             | 252                    |
| _  | FIRST PRESENTATION OF MULTIPLE DEPENDENT       |  |              |             | T CLAIM                      |                  | J      | .125-             |                        |            | +270=            |                        |
|  |  |  |              |             |                              |                  |        | +135=             |                        | OR         | TOYAL            | 11000                  |
| ADDIT, FEE OR ADDIT, FEE 93  |  |  |              |             |                              |                  |        |                   |                        |            |                  |                        |
| (Column 1) (Column 2) (Column 3)   |  |  |              |             |                              |                  |        |                   |                        |            |                  |                        |
| AMENDMENT C  |  | CLAIMS REMAINING AFTER AMENDMENT         |              | NUI<br>PREV | MBER<br>TOUSLY<br>D FOR      | PRESENT<br>EXTRA |        | RATE              | ADDI-<br>TIONAL<br>FEE |            | RATE             | ADDI-<br>TIONAL<br>FEE |
|  | Total  | •  | Minus        | ••          |                              | =                |        | X\$ 9=            |                        | OR         | X\$18=           |                        |
|  | Independent                                    | •  | Minus        | •••         |                              | =                |        | X40=              |                        | OR         | · X80=           |                        |
| Ľ  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |              |             |                              |                  |        | 105               |                        | 1          |                  |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  |  |  |              |             |                              |                  |        |                   |                        | OR         | YOYA             |                        |
| "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE  |  |  |              |             |                              |                  |        |                   |                        |            |                  |                        |
| The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.  |  |  |              |             |                              |                  |        |                   |                        |            |                  |                        |